

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Reuben MARK</i>		<b>Position:</b> <u>1</u> or 2	
<b>Station:</b> <i>New Castle</i>		<b>Date:</b> <i>7-3-13</i>	<b>Time:</b> <i>12:30</i>
<b>Vehicle Make:</b> <i>Pontiac</i>		<b>Model:</b> <i>510</i>	<b>Year:</b> <i>1988</i>
<b>GVWR:</b> <i>5000</i>	<b>Fuel Type:</b> <i>CAS</i>	<b>Registration Number:</b> <i>0101425</i>	
<b>Auditor:</b> <i>Coverdale</i>		<b>Covert / <u>Overt</u></b> (circle one)	
		<b>YES</b>	<b>NO</b>
<b>1. Did technician check vehicle paper work and verify VIN number?</b>			
	<input checked="" type="checkbox"/>		
<b>2. Was Emissions testing required?</b>			
	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?			
	<input checked="" type="checkbox"/>		
c) Was Emissions testing performed using Paddle(s)?			
	<input checked="" type="checkbox"/>		
d) Was Emissions testing performed using Clip?			
<b>3. Was Catalytic Converter inspection required?</b>			
	<input checked="" type="checkbox"/>		
a) Was Catalytic Converter inspection performed?			
	<input checked="" type="checkbox"/>		
<b>4. Was Fuel Tank pressure testing required?</b>			
			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			
			<input checked="" type="checkbox"/>
<b>5. Was Fuel Cap pressure testing required?</b>			
			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			
			<input checked="" type="checkbox"/>
<b>6. Is this test a Re-check from a prior failure?</b>			
		<input checked="" type="checkbox"/>	
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
<b>7. Was Two-Speed Idle testing required?</b>			
	<input checked="" type="checkbox"/>		
a) Was Two-Speed Idle testing performed?			
	<input checked="" type="checkbox"/>		
<b>Sussex County Only</b>			
<b>8. Was Curb Idle testing required?</b>			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			
Lane Supervisor Signature:			

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Peart Eric Patrak</i>		<b>Position:</b> 1 or <u>2</u>	
<b>Station:</b> <i>New Castle</i>		<b>Date:</b> <i>7-3-13</i>	<b>Time:</b> <i>1:35</i>
<b>Vehicle Make:</b> <i> Chevy</i>		<b>Model:</b> <i>510</i>	<b>Year:</b> <i>1989</i>
<b>GVWR:</b> <i>5000</i>	<b>Fuel Type:</b> <i>Gas</i>	<b>Registration Number:</b> <i>C1D1425</i>	
<b>Auditor:</b> <i>Coverdale</i>		<b>Covert / <u>Overt</u></b> (circle one)	

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	✓		
2. Was <b>Emissions</b> testing required?	✓		
a) Was Emissions testing performed using OBD?		✗	✓
b) Was Emissions testing performed using Analyzer Probe?			✓
c) Was Emissions testing performed using Paddle(s)?			✓
d) Was Emissions testing performed using Clip?			✓
3. Was <b>Catalytic Converter</b> inspection required?			✓
a) Was Catalytic Converter inspection performed?			✓
4. Was <b>Fuel Tank</b> pressure testing required?	✓		
a) Was Fuel Tank pressure testing performed?	✓		
5. Was <b>Fuel Cap</b> pressure testing required?	✓		
a) Was Fuel Cap pressure testing performed?	✓		
6. Is this test a <b>Re-check</b> from a prior failure?		✓	
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?	✓		
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			
Lane Supervisor Signature:			

Revised 04/12/2013

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Wright man Steve</i>		<b>Position:</b> <i>1 or 2</i>	
<b>Station:</b> <i>New Castle</i>	<b>Date:</b> <i>7-3-13</i>	<b>Time:</b> <i>11:15</i>	
<b>Vehicle Make:</b> <i>Honda</i>	<b>Model:</b> <i>Accord</i>	<b>Year:</b> <i>1995</i>	
<b>GVWR:</b>	<b>Fuel Type:</b> <i>Gas</i>	<b>Registration Number:</b> <i>28L53694</i>	
<b>Auditor:</b> <i>Coverdale</i>		<b>Covert / <u>Overt</u></b> (circle one)	
	<b>YES</b>	<b>NO</b>	<b>N/A</b>
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was <b>Emissions</b> testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?	<input checked="" type="checkbox"/>		
c) Was Emissions testing performed using Paddle(s)?	<input checked="" type="checkbox"/>		
d) Was Emissions testing performed using Clip?			
3. Was <b>Catalytic Converter</b> inspection required?	<input checked="" type="checkbox"/>		
a) Was Catalytic Converter inspection performed?	<input checked="" type="checkbox"/>		
4. Was <b>Fuel Tank</b> pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was <b>Fuel Cap</b> pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a <b>Re-check</b> from a prior failure?		<input checked="" type="checkbox"/>	
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?	<input checked="" type="checkbox"/>		
a) Was Two-Speed Idle testing performed?	<input checked="" type="checkbox"/>		
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			
Lane Supervisor Signature:			



## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Smith, James</i>		<b>Position:</b> <u>1 or 2</u>	
<b>Station:</b> <i>New Castle</i>	<b>Date:</b> <i>7-3-13</i>	<b>Time:</b> <i>11:25</i>	
<b>Vehicle Make:</b> <i>Honda</i>	<b>Model:</b> <i>Accord</i>	<b>Year:</b> <i>1995</i>	
<b>GVWR:</b>	<b>Fuel Type:</b> <i>Gas</i>	<b>Registration Number:</b> <i>CL53694</i>	
<b>Auditor:</b> <i>Coverdale</i>		<b>Covert / <u>Overt</u></b> (circle one)	

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	✓		
2. Was <b>Emissions</b> testing required?	✓		
a) Was Emissions testing performed using OBD?			✓
b) Was Emissions testing performed using Analyzer Probe?			✓
c) Was Emissions testing performed using Paddle(s)?			✓
d) Was Emissions testing performed using Clip?			✓
3. Was <b>Catalytic Converter</b> inspection required?			✓
a) Was Catalytic Converter inspection performed?			✓
4. Was <b>Fuel Tank</b> pressure testing required?	✓		
a) Was Fuel Tank pressure testing performed?	✓		
5. Was <b>Fuel Cap</b> pressure testing required?	✓		
a) Was Fuel Cap pressure testing performed?	✓		
6. Is this test a <b>Re-check</b> from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)		✓	
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?	✓		
a) Was Two-Speed Idle testing performed?	✓		
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			
Lane Supervisor Signature:			

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Le Grand Michael</i>		<b>Position:</b> <i>1 or 2</i>
<b>Station:</b> <i>New Castle</i>	<b>Date:</b> <i>7-3-13</i>	<b>Time:</b> <i>12:15</i>
<b>Vehicle Make:</b> <i>Chrysler</i>	<b>Model:</b> <i>Pacific</i>	<b>Year:</b> <i>2004</i>
<b>GVWR:</b>	<b>Fuel Type:</b> <i>Gas</i>	<b>Registration Number:</b> <i>see below</i>
<b>Auditor:</b> <i>Coverdale</i>		<b>Covert / Overt</b> (circle one)
	<b>YES</b>	<b>NO</b>
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Was <b>Emissions</b> testing required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
a) Was Emissions testing performed using OBD?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b) Was Emissions testing performed using Analyzer Probe?	<input type="checkbox"/>	<input type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?	<input type="checkbox"/>	<input type="checkbox"/>
d) Was Emissions testing performed using Clip?	<input type="checkbox"/>	<input type="checkbox"/>
3. Was <b>Catalytic Converter</b> inspection required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?	<input type="checkbox"/>	<input type="checkbox"/>
4. Was <b>Fuel Tank</b> pressure testing required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?	<input type="checkbox"/>	<input type="checkbox"/>
5. Was <b>Fuel Cap</b> pressure testing required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?	<input type="checkbox"/>	<input type="checkbox"/>
6. Is this test a <b>Re-check</b> from a prior failure?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)	<input type="checkbox"/>	<input type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?	<input type="checkbox"/>	<input type="checkbox"/>
<b>New Castle and Kent Counties Only</b>		
7. Was Two-Speed Idle testing required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a) Was Two-Speed Idle testing performed?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sussex County Only</b>		
8. Was <b>Curb Idle</b> testing required?	<input type="checkbox"/>	<input type="checkbox"/>
a) Was Curb Idle testing performed?	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comment:</b> <i>2C8GM68484R559948</i>		
Lane Supervisor Signature:		

Revised 04/12/2013



## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <u>Rorr Elbery</u>		<b>Position:</b> <u>1 or 2</u>	
<b>Station:</b> <u>New Castle</u>	<b>Date:</b> <u>7-3-13</u>	<b>Time:</b> <u>12:15</u>	
<b>Vehicle Make:</b> <u>Saturn</u>	<b>Model:</b> <u>SC</u>	<b>Year:</b> <u>2002</u>	
<b>GVWR:</b>	<b>Fuel Type:</b> <u>GAS</u>	<b>Registration Number:</b> <u>388919</u>	
<b>Auditor:</b> <u>Coverdale</u>		<b>Covert / <u>Overt</u> (circle one)</b>	

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	✓		
2. Was <b>Emissions</b> testing required?	✓		
a) Was Emissions testing performed using OBD?	✓		
b) Was Emissions testing performed using Analyzer Probe?			
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was <b>Catalytic Converter</b> inspection required?			✓
a) Was Catalytic Converter inspection performed?			
4. Was <b>Fuel Tank</b> pressure testing required?			✓
a) Was Fuel Tank pressure testing performed?			
5. Was <b>Fuel Cap</b> pressure testing required?			✓
a) Was Fuel Cap pressure testing performed?			
6. Is this test a <b>Re-check</b> from a prior failure?		✓	
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?		✓	
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?			
a) Was Curb Idle testing performed?			
<b>Comment:</b>			
Lane Supervisor Signature:			

Revised 04/12/2013